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Worker Self-Care and Secondary Trauma

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Outline

- Secondary trauma
- Prevention and intervention
- Trauma informed self care
- Guidance for supervisors

Secondary Trauma

- A result of one's exposure to someone else's trauma
- The more often you are exposed to someone else's trauma, the more likely you are to experience secondary trauma
- Symptoms mirror those of Post-Traumatic Stress Disorder (PTSD):
 - Avoidance, Arousal, Negative Thoughts, Intrusion, Fear, Chronic Fatigue, Guilt, Hopelessness, Anger/Cynicism, Sleeplessness
- Secondary trauma and compassion fatigue take a toll on team and individual performance

Who is at Risk of Secondary Trauma

- Up to 50% of child welfare workers
- Any professional working with a traumatized population, including therapists
- Woman are at greater risk
- Individuals who display a higher sense of empathy are at greater risk
- Characteristics that could make experiencing secondary trauma or compassion fatigue more likely:
 - Personal history of trauma
 - Fewer years of professional experience
 - Younger age
 - Workload
 - Salary
 - Supervisory support

What is Compassion Satisfaction?

- Compassion satisfaction protects against secondary trauma
- Positive benefits received from direct work or contact with vulnerable populations
- Compassion satisfaction includes feelings of pleasure resulting from helping others
- Individuals experiencing compassion satisfaction usually report a strong belief in the importance of their position in helping others

Assessing For Secondary Trauma

- Useful tool for quick self-assessment
- Professional Quality of Life Measure (ProQOL)
 - Measures compassion satisfaction v. compassion fatigue
- When you help people, you have direct contact with their lives. As you may have found, your compassion for those you help can affect you in positive and negative ways
- These are questions about your experiences, both positive and negative, as a social worker

Preventing Secondary Trauma

- Clinical supervision
- Ongoing training
- Self care
- Balanced caseloads
- Use of evidence-based practices

- Exercise
- Good nutrition
- Psychoeducation
- Self reporting screening

Intervention for Secondary Trauma

- Cognitive Behavioral Therapy
- Mindfulness
- Balancing of caseload
- Change in job assignment
- Referrals to Employee Assistance Program or outside resources
- Meetings following a crisis to allow for discussions

What is Compassion Fatigue?

- Characterized by
 - Depersonalization
 - Emotional exhaustion
 - Cynicism
 - Lack of effectiveness
 - Depletion of emotional resources and personal energy

- Caused by chronic exposure or work with vulnerable populations
- Can lead to a decrease in
 - Job satisfaction
 - Performance
 - Commitment to the organization

COVID-19's Contribution to Compassion Fatigue

For Clients:

- Client needs are increasing as services simultaneously decrease
- COVID-19 has highlighted the immediate impact of racism in medicine and other spaces, which weighs on many of those we serve
- Feeling the effects of unemployment, illness, and mental health concerns related to COVID-19

COVID-19's Contribution to Compassion Fatigue

For Staff:

- Unlike frontline medical workers, many social workers have been asked to move their offices into their homes, erasing many work-life boundaries
- Staff not trained to work in chronic pandemic conditions via technology from home
- Can feel guilty prioritizing their own well-being in the face of the personal, institutional, and political crises affecting their clients
- Have limited physical interactions, limited opportunities to receive support of colleagues, and have few opportunities to debrief their sensitive work

Workplace Practices to Help Reduce Compassion Fatigue

Flexible or compressed work schedules

Meaningful, trauma informed supervision

Remote work options

Trauma Informed Self Care

- Practices that help one manage their physical and emotional wellbeing
- Understanding and identifying the impact that trauma has on individuals and families and responding to effects of trauma exposure
- Trauma informed training is correlated with increased compassion satisfaction and decreased compassion fatigue

Trauma Informed Self Care Practices

- There are a number of key trauma informed self care practices
 - Regular and supportive supervision
 - Peer support
 - Working as a team

Being Trauma Informed: Core Competencies for Supervisors

- Identify signs, symptoms, and risk factors of secondary trauma
- Have knowledge of support options that include Employee Assistance Programs or other supportive services
- Self assess, address, and monitor secondary trauma
- Encourage staff to share emotional experiences in a safe and supportive manner
- Model appropriate self disclosure to respond to traumatic event
- Differentiate between
 - Anticipated changes in perspectives
 - Cognitive distortions related to secondary trauma exposure

Specialized Training in Child Welfare

- Leads to
 - higher rates of satisfaction for front line staff
 - staff that are more satisfied in supervisory/ leadership roles
 - staff that are less likely to develop feelings of depersonalization

Fostering Supervisor Support and Self Care

- Ensure staff have weekly (or at minimum biweekly) one-on-one meetings with supervisors
 - If possible, make these meetings face to face
- Continue to meet as a team, even if these meetings are virtual
- Important for individuals to have their teammates to discuss and share workload for difficult cases
- Important that staff remain connected with their peers
- Express appreciation for staff during these difficult times



Worker Self-Care

For more information

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